

Prevention and Chronic Care Management /Medical Home Advisory Council

Why are we here?

What are we supposed to be doing?

What will be working on in the future?

Legislative Charges

1. Convene a taskforce to develop a plan for implementation of a statewide medical home system in Iowa.
2. Adopt rules to administer a medical home system
3. Adopt standards and a process to certify medical homes based on NCQA standards
4. Adopt education and training standards for health care professionals participating in the medical home system
5. Provide for system simplification through the use of universal referral forms, internet-based tools for providers, and central medical home internet site for providers
6. Recommend reimbursement methodology and incentives for participation in the medical home system to ensure the providers enter and remain participating in the system
7. Coordinate the medical home system with requirements and activities of the dental home for children
8. Provide oversight for all certified medical homes, and review the progress of the medical home system and recommend improvements to the system
9. Evaluate annually the medical home system and make recommendations to the governor and general assembly regarding improvements to and continuation of the system
10. Obtain approval from the board on recommendation and other activities resulting from the authorized duties of the department prior to any subsequent action or implementation

Progress/Accomplishments So Far

1. Convened a highly engaged taskforce of leaders and stakeholders in Iowa.
 - The Council adapts to emerging issues with the ACA and they discuss the “big picture” off all of the initiatives in Iowa and bring it all together.
 - They make recommendation for Iowa-based solutions to do population based care.
2. Issue Briefs and Progress Reports
3. 3 legislatively mandated tasks completed
4. Voted on medical home definition
5. Stakeholder input for various state health care programs such as Health Home program, SIM, and Community Care Teams

Place or Process?

Additional skillset based on the joint principles of a PCMH to deliver improved outcomes and value-based care

Design Principles for a new name

Simplicity- Not representative, less focus on turf

Directional- Where do we need to be?

Communicable- Easier to describe what we do

Options

1. Community Care Coordination Council
2. Health Care Reform Council
3. Patient-Centered Care Coordination Advisory Council
4. Advisory Council on Health Care Coordination
5. Advisory Council on Patient Care Coordination
6. Advisory Council for Health Coordination
7. Advisory Council for Patient-Centered Care Coordination
8. Health Care Transformation Advisory Council
9. Triple Aim Advisory Council

Patient-Centered Health Advisory Council